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COVER LETTER

Division of Corporations				
SUBJECT: Dynia and Associate	s, LLC			
Name of Foreign	Limited Lia	bility Com	pany	
Dear Sir or Madam:	,			,
The enclosed application, certificate and fee(s) a	re submitted	for filing.		٠
Please return all correspondence concerning this	matter to the	e following:	:	_
Christine Manno				
Name of Person		<u> </u>		
Acumen Solutions Group				
Firm/Company				
600 Broadhollow Road Suite	200	_		
Address		-	•	/ n.a
Melville, NY 11747				
City/State and Zip Code		. 		15 N S S
licensing@acumensolutions	grouplic	c.com		
E-mail address: (to be used for future annual r	•		~	ELGRIBA
For further information concerning this matter, p	lease call:			
Christine Manno	_{at (} 631	_ _{.)} 719-	·5509	i ·
Name of Person	Area Cod	le & Daytin	ne Telephone Number	
			DIG ADDDEGG	·
STREET/COURIER ADDRESS: Registration Section			ING ADDRESS: ration Section	
Division of Corporations		-	on of Corporations	
Clifton Building			ox 6327	•
2661 Executive Center Circle Tallahassee, Florida 323		assee, Florida 32314		
Tallahassee, Florida 32301				:
Enclosed is a check for the following amount:				
■ \$25 Filing Fee □ \$30 Filing Fee &	🗆 \$55 Filii	_	□ \$60 Filing Fee,	_
Certificate of Status	Certified	і Сору	Certificate of Statu Certified Copy	.s &

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

Name of limited liability company as it appears on the records of the Florida Department State: Dynia and Associates, LLC	of
2. Jurisdiction of its organization: Illinois	· ·
. Date authorized to do business in Florida: 11/12/2009	<u>.</u>
SECTION II (4-7 complete only the applicable changes)	•
. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? March 6, 2015	
. New name of the limited liability company: D & A Services, LLC (must end with "Limited Liability Company," "L.L.C.," or "L	LC.")
D & A Services, LLC of IL	
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adop the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C. or "LLC.")	ting
. If the amendment changes the period of duration, indicate new period of duration:	
. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	E STANK
. If the amendment corrects any false statement, indicate the statement being corrected correction:	and the
Attached is an original destificate, no more than 90 days old, evidencing the aforemention amendment(s), duly authenticated by the official having custody of records in the jurisdithe law of which this entity is organized. Signature of a member or the authorized representative of a member	
David Carr	
Typed or printed name of signee	

Filing Fee: \$25.00

File Number

0181781-7



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

D & A SERVICES, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON APRIL 03, 2006, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of **MARCH**

2015

Authentication #: 1507802263 verifiable until 03/19/2016. Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE